	Express Mail Label No. (if applicable)							
ו	Application No.	10/706,128						
	Confirmation No.	1617						
	Filing Date	November 12, 2003						
	First Named Inventor	Peter Gruber						

1617

225198

Kendra D. Carter

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## Request for Continued Examination (RCE) Transmittal

Address to: Mail Stop RCE Commissioner For Patents P.O. Box 1450 Alexandria, VA 22313-1450

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Group Art Unit

Examiner Name

Attorney Docket No.

Client Reference No.

4 Output size a manifest and an 27 OFD 4 444										
	<ol> <li>Submission required under 37 CFR 1.114</li> <li>a. ☐ Previously submitted</li> </ol>									
a	. Ш і.				renly under	r 37 CFR	1 116 previou	sly filed o	on	
	<ul> <li>i. Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on (Any unentered amendment(s) referred to above will be entered.)</li> </ul>									
	ii. Consider the arguments in the Appeal Brief or Reply Brief previously filed on									
	iii. Other:									
b		Enclosed				_	<b>-</b>			
	i.			•			Form PTC		=	570 4440
	ii.	☐ Affidavit	(s)/Decia	aration(s)		V.			ces listed in For s and applications)	m PTO-1449
	iii.		ion Disc	losure State	ment (IDS)	vi.	Other:			
2. <b>N</b>	- · · ·									
a.   Suspension of action on the above-identified application is requested under 37 CFR 1.103(c)							c) for a period			
of months. (Period of suspension shall not exceed 3 months; fee under 37 CFR 1.17(i) required.)										
b. Applicant claims small entity status. See 37 CFR 1.27										
С		Other:								
3. <b>F</b>	ees -						CFR 1.114 wh			
a	a. 🛛 Please charge Deposit Account No. 12-1216 in the total amount indicated below.									
(A duplicate copy of this communication is enclosed for that purpose, unless submitted via EFS-Web.)								0405.00		
i. RCE fee of \$405.00 (small entity) required under 37 CFR 1.17(e)								\$405.00		
ii. Xiii Two-month extension of time fee of \$230.00 (37 CFR 1.136 and 1.17)								\$230.00		
	iii.	An exter					red and the fe			
				ed from the t	otal fee du	e for the t	otal amount o	f extension	on now	
	:	requeste		damaian of ti	(inaludi	the ne	-iad patad ab	- if oh	!cod\	
	iv.						riod noted abo der the prese			
							the appropriat			
	٧.		-	ction fee of \$				e pennon	100.	\$ 0.00
	v. vi.	Other:	sion or a	cuon lee or 4	130.00 (37	O1 10 1.1	<i>(</i> (1))			Ψ 0.00
vi. ☐ Otner: vii. ☐ Claim fee										
	V 11.	CLAIMS	Ī	HIGHEST						
		REMAINING		Number	Extra		Add'l		Add'L	
		AFTER		PREVIOUSLY	CLAIMS		CLAIM		CLAIM	
CLAIM	FEE	AMENDMENT		PAID FOR	PRESENT	RATE	FEE	RATE	FEE	
TOTAL		16	Minus	24	= 0	x 25 =		x 50 =		
INDEPENDENT			Minus	3	= 0	x 105 =		x 210 =		
FIRST PRESENTATION OF MULTIPLE CLAIM + 185 = + 370 =										
						\$635.00				
b.   The Commissioner is hereby authorized to charge any deficiencies in the above fees or to										
credit any overpayments to Deposit Account No. 12-1216. (A duplicate copy of this										
I	communication is enclosed for that purpose, unless submitted via EFS-Web.)									

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED									
Name (Print/Type)	Xavier Pillai	Registration No. (Attorney/Agent)	39,799						
Signature	Xaiz bilai	Date	May 21, 2008						
Address	Leydig, Voit & Mayer, Ltd. Two Prudential Plaza, Suite 4900 180 North Stetson Avenue Chicago, Illinois 60601-6731	Phone	(312) 616-5600 (telephone) (312) 616-5700 (facsimile)						